



(INTERIM FORM)

CANDIDATE'S CAMPAIGN STATEMENT SHORT FORM

(Government Code Section 84200-84214)

Form 470

Period 7-1-75 through 12-31-75

A candidate for whom not more than \$200 has been received or spent on behalf of his candidacy may file this short form. NOTE: Once contributions or expenditures exceed \$200 for the ENTIRE CAMPAIGN, then the candidate must file Form 430.

Name of Candidate BEN SCHAFFER

Residential address 600 CONNIE ST. LODI CALIF. 95240 Phone 209 368 0040
(No. and Street) (City) (State) (Zip) (area code)

Business address 122 NO. CHURCH ST. LODI CALIF. 95240 Phone 209 368 5311
(No. and Street) (City) (State) (Zip) (area code)

T_Y of election N/A Date of election N/A
(Primary, General, Special) (Month, day, year)

Office for which you are a candidate N/A (NOT A CANDIDATE)

Political party and district number (if applicable) N/A

VERIFICATION

I declare under penalty of perjury that to the best of my knowledge not more than \$200 has been received or expended on behalf of or in support of my candidacy, by myself or by any committee of which I have knowledge.

Executed on 1-13-76 at LODI CALIF.
(Date) (City and State)

Ben Schaffer
(Signature of Candidate)

NOTE: This form must be filed in duplicate